Fill	in this information	to identify your ca	950.				I				
	otor 1	Marcus K Gı									
	otor 2 use, if filing)										
Uni	ted States Bankrup	otcy Court for the	NORTHERN DISTRIC	T OF ILLINOIS							
	se number 19	-25299					• • • • • • • • • • • • • • • • • • • •	nt showir	ng postpetition chapter following date:		
<u>O</u> 1	fficial Form	1061					MM / DD/ YYYY				
So	chedule I:	Your Inco	ome						12/15		
supį spoi attad	olying correct infouse. If you are sep ch a separate she	ormation. If you parated and you	sible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your sp th you, do not include	ouse infor	is liv mati	ing with you, inclu on about your spo	ıde infor use. If m	mation about your ore space is needed,		
1.	Fill in your emplinformation.	loyment		Debtor 1			Debtor 2	or non-f	filing spouse		
	If you have more attach a separate		Employment status	■ Employed			☐ Emplo	•			
	information about employers.	1 0		☐ Not employed			☐ Not er	nployed			
	Include part-time	seasonal or	Occupation	Customer Service)						
	self-employed wo		Employer's name	Cellco Partnershi	р						
	Occupation may or homemaker, if		Employer's address	One Verizon Way Basking Ridge, N		20					
			How long employed the	nere? 12 years							
Esti			ate you file this form. If y	ou have nothing to rep	ort for	any	ine, write \$0 in the	space. In	nclude your non-filing		
•	u or your non-filing e space, attach a s	•	ore than one employer, co	mbine the information	or all	emplo	oyers for that perso	n on the I	lines below. If you need		
							For Debtor 1		ebtor 2 or ling spouse		
2.			ry, and commissions (becalculate what the month)		2.	\$	4,124.00	\$	N/A		
3.	Estimate and lis	st monthly overti	me pay.		3.	+\$	0.00	+\$	N/A		

4,124.00

\$

N/A

4. Calculate gross Income. Add line 2 + line 3.

Deb	tor 1	Marcus K Graves			C	ase number (<i>if ki</i>	iown)	19-2	25299		
						For Debtor 1		For	· Debtor	2 or	
						TOT DEDICT T			า-filing s		
	Cop	by line 4 here		4.		\$4,124	1.00	\$_		N/A	-
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Secur	ity deductions	5a.		\$ 472	2.00	\$		N/A	
	5b.	Mandatory contributions for reti	rement plans	5b.			0.00	\$		N/A	_
	5c.	Voluntary contributions for retire	ement plans	5c.		\$ (0.00	\$		N/A	-
	5d.	Required repayments of retirement	ent fund loans	5d.		\$ 97	7.00	\$		N/A	_
	5e.	Insurance		5e.			2.00	\$		N/A	_
	5f.	Domestic support obligations		5f.		. —	0.00			N/A	_
	5g.	Union dues	_	5g.			0.00	\$_		N/A	_
	5h.	Other deductions. Specify: HS		5h.			2.00			N/A	_
6.		d the payroll deductions. Add lines	Ğ	6.			3.00	\$_		N/A	_
7.		culate total monthly take-home pay		7.	;	\$3,211	.00	\$_		N/A	_
8.	List 8a.	all other income regularly received Net income from rental property profession, or farm	and from operating a business,								
		Attach a statement for each proper receipts, ordinary and necessary b									
		monthly net income.	usiness expenses, and the total	8a.		\$ (0.00	\$		N/A	
	8b.	Interest and dividends		8b.			0.00	\$		N/A	_
	8c.	regularly receive	ou, a non-filing spouse, or a depend	ent				_			_
			child support, maintenance, divorce	0.0		Φ.		¢		N1/A	
	8d.	settlement, and property settlemen	it.	8c. 8d.		. —	0.00	* *		N/A	_
	8e.	Unemployment compensation Social Security		8e.		·	0.00 0.00	• • • –		N/A N/A	_
	8f.	Other government assistance th	at you regularly receive	06.	•	Ψ	7.00	Ψ_		IN/A	_
	· · ·	Include cash assistance and the va	alue (if known) of any non-cash assistance (if known) of any non-cash assistance (if known) and all with the Supplemental (if known) are the supplemental (if	ince 8f.		\$	0.00	\$		N/A	
	8g.	Pension or retirement income		8g.			0.00	· - φ –		N/A	_
	og.	Tension of retirement income	Cellco Partnership, debtor's	og.	•	Ψ	7.00	Ψ_		11//	-
	8h.	Other monthly income. Specify:		8h.	.+	\$50	0.00	+ \$_		N/A	_
9.	Add	d all other income. Add lines 8a+8b	+8c+8d+8e+8f+8g+8h.	9.	\$	50	0.00	\$_		N/A	4
10.	Cal	culate monthly income. Add line 7	+ line 9	10.	\$	3,261.00	+ \$		N/A	= \$	3.261.00
10.		the entries in line 10 for Debtor 1 and		10.	Ψ_	3,201.00	• •		IVA	- Ψ -	3,201.00
11.	Star Incli othe Do	te all other regular contributions to ude contributions from an unmarried per friends or relatives.	the expenses that you list in Schedorattner, members of your household, yuded in lines 2-10 or amounts that are	our depe				•		e <i>J</i> . +\$	0.00
12.		te that amount on the Summary of Sc	line 10 to the amount in line 11. The hedules and Statistical Summary of Co						12.	\$	3,261.00
13.	Do	you expect an increase or decreas	e within the year after you file this fo	orm?						Combi monthl	ned ly income
		No									
	П	Yes. Explain:									

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Fill	in this inform	nation to identify yo	our case:						
Deb	otor 1	Marcus K Gr	raves			Ch ■ □		led filing nent shov	wing postpetition chapter the following date:
	,	kruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD /		
Cas		19-25299							
Of	fficial F	orm 106J							
So	chedul	e J: Your	Expen	ises					12/1
info	ormation. If		eded, atta	If two married people ar ch another sheet to this n.					
Par 1.	t 1: Des	cribe Your House	hold						
'.	■ No. Go □ Yes. Do	to line 2. pes Debtor 2 live i		ate household? al Form 106J-2, <i>Expens</i> es	for Separate House	ehold of De	ebtor 2.		
2.	Do vou ha	ve dependents?	■ No		·				
۷.	-	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Depen age	dent's	Does dependent live with you?
	Do not stat dependent								□ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No
3.	expenses	xpenses include of people other t nd your depende	han 🦳	No Yes					☐ Yes
Est exp	imate your	a date after the l	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this follower that the desired the second sec	orm as a s J, check	supplement the box at t	in a Cha he top o	apter 13 case to report f the form and fill in the
the		ch assistance an		government assistance i luded it on <i>Schedule I:</i>)			Y	our expe	enses
4.		or home owners and any rent for th		ses for your residence. I	nclude first mortgage	e 4.	\$		1,160.00
	If not inclu	ıded in line 4:							
		estate taxes erty, homeowner's	s, or renter	's insurance		4a. 4b.	·		0.00
		ie maintenance, re ieowner's associat				4c. 4d.	·		0.00
5.				our residence, such as ho	me equity loans	5.			0.00

ebtor 1 N	larcus K Graves	Case number (if known)	19-25299
. Utilities			
	lectricity, heat, natural gas	6a. \$	220.00
	/ater, sewer, garbage collection	6b. \$	50.00
	elephone, cell phone, Internet, satellite, and cable services	6c. \$	55.00
	other. Specify:	6d. \$	0.00
	nd housekeeping supplies	7. \$	315.60
	re and children's education costs	8. \$	
		9. \$	0.00
	g, laundry, and dry cleaning	·	44.00
	al care products and services	· <u>———</u>	55.00
	l and dental expenses	11. \$	10.00
	ortation. Include gas, maintenance, bus or train fare. nclude car payments.	12. \$	130.00
	inment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
	ble contributions and religious donations	14. \$	0.00
. Insuran	<u> </u>	ιτ. ψ	0.00
	nclude insurance deducted from your pay or included in lines 4 or 20.		
	ife insurance	15a. \$	0.00
	ealth insurance	15b. \$	0.00
	ehicle insurance	15c. \$	105.00
	other insurance. Specify:	15d. \$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		0.00
Specify:		16. \$	0.00
	nent or lease payments:	47- (400.40
	ar payments for Vehicle 1	17a. \$	409.40
	ar payments for Vehicle 2	17b. \$	0.00
	ther. Specify:	17c. \$	0.00
	ther. Specify:	17d. \$	0.00
	syments of alimony, maintenance, and support that you did not report as		0.00
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106I). ayments you make to support others who do not live with you.	\$	
Specify:		Ψ	0.00
. ,	eal property expenses not included in lines 4 or 5 of this form or on Scho		
	lortgages on other property	20a. \$	0.00
	eal estate taxes	20b. \$	0.00
	roperty, homeowner's, or renter's insurance	20c. \$	0.00
	laintenance, repair, and upkeep expenses	20d. \$	
		·	0.00
	omeowner's association or condominium dues	20e. \$	0.00
. Other: S	Specify:	21. +\$	0.00
. Calcula	te your monthly expenses		
22a. Ad	d lines 4 through 21.	\$	2,554.00
22b. Co	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$,
	d line 22a and 22b. The result is your monthly expenses.	\$ 	2,554.00
		Ψ	2,334.00
	te your monthly net income.		
23a. C	opy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,261.00
23b. C	opy your monthly expenses from line 22c above.	23b\$	2,554.00
			·
	ubtract your monthly expenses from your monthly income.	00 -	707 00
Т	he result is your monthly net income.	23c. \$	707.00
4 De ve	expect an increase or degrees in your expenses within the year offer w	ou file this form?	
	expect an increase or decrease in your expenses within the year after you ple, do you expect to finish paying for your car loan within the year or do you expect you		ease or decrease because o
	ion to the terms of your mortgage?	mongage payment to mor	case or accrease because (
■ No.	,		
— No.	Explain here:		